World powers stand by as Ebola death toll passes 4,000

Niles Williamson 11 October 2014

The World Health Organization (WHO) reported on Friday that the death toll in the ongoing Ebola epidemic continues to rise with 4,033 deaths out of 8,399 cases in seven countries. Almost all of the deaths have occurred in the West African countries of Liberia, Sierra Leone, Guinea and Nigeria. According to the latest report by the WHO, there is no evidence that current efforts have been able to bring the epidemic under control.

Given the scale of the social disaster in West Africa and the threat to the entire world's population, the response by the United States and other imperialist powers has been derisive and entirely irresponsible. Rather than reacting immediately with a massive multibillion-dollar emergency humanitarian aid program involving the deployment of thousands of doctors, nurses and health care workers, the US government waited almost an entire year to respond in any significant way to the Ebola outbreak.

Now the Obama administration is planning to spend \$1 billion over the next year funding a military operation to build a limited number of treatment centers. This response is grossly inadequate for stopping the epidemic and derisory compared to the \$1.1 billion the US government has spent in the last four months alone on bombing ISIS in Iraq and Syria. Instead of seeking to halt the Ebola epidemic in its tracks, the Obama administration is utilizing the humanitarian crisis as cover for expanding its military presence in Africa.

Over the next year approximately 4,000 soldiers will be deployed to Liberia under the command of AFRICOM under the guise of building Ebola treatment centers and testing laboratories. There are no plans for US military doctors or medics to directly engage in the treatment of Ebola patients.

At a press conference on Thursday, Thomas Frieden,

director of the US Centers for Disease Control and Prevention (CDC), called for a dramatic increase in the response to the Ebola epidemic in West Africa. "In the 30 years I've been working in public health, the only thing like this has been AIDS," he told reporters. "We need to act now so that this is not the world's next AIDS," he said.

Frieden's comparison of Ebola to AIDS is misleading, as the two diseases differ in their transmissibility and the rapidity with which the infected person succumbs to the disease. While AIDS develops from the contraction of HIV, often through sexual intercourse or the sharing of intravenous needles, Ebola is spread much more readily through contact with the bodily fluids of an infected person.

An individual infected with HIV can go months and often years before showing any symptoms or before they develop AIDS and are killed by the disease. Ebola is a fast-acting disease; a person who contracts the disease will show symptoms after two days to two weeks of infection and die of complete organ failure after a week to two weeks after the first symptoms.

However, Ebola is similar to HIV/AIDS in that the virus feeds off the deep poverty that pervades the African continent and, if left unchecked, threatens devastating consequences for the entire world. Since the emergence of the AIDS epidemic, an estimated 36 million people worldwide have died of AIDS-related complications. Sub-Saharan Africa has been particularly affected, accounting for 70 percent of the world's population living with HIV and 70 percent of AIDS-related deaths.

In his Thursday press conference, Frieden also called for a greater investment in efforts to control the spread of infectious diseases such as Ebola. "Speed is the most important variable here. This is controllable and this was preventable. Public health is sorely underinvested in and yet it is a best buy," he said.

Despite the urgent need for studying and containing infectious diseases such as Ebola, the CDC's annual budget fell from \$6.5 billion to \$5.9 billion between 2010 and 2013. Additionally, last year's federal sequester cuts eliminated a further \$285 million from the CDC's 2013 budget, including a \$13 million cut to the CDC's Emerging and Zoonotic Infectious Disease program, which studies viruses such as Ebola.

On Friday Senator James Inhofe, the top Republican on the Senate Armed Services Committee, agreed to allow the Department of Defense to shift \$750 million in defense funding to the Obama administration's military intervention in West Africa. "After careful consideration, I believe that the outbreak has reached a point that the only organization in the world able to provide the capabilities and speed necessary to respond to this crisis is the U.S. military," Inhofe said.

Inhofe had blocked the transfer of funds for the operation until the administration explained its long-term strategy for combating Ebola in Liberia and how American troops would be protected from contracting the deadly virus. The new tranche of funds brings the amount committed by the Pentagon to the military operation in Liberia to \$1 billion over the next year.

At the annual meeting of the International Monetary Fund and World Bank on Thursday, the leaders of the three countries most affected by the outbreak, Liberia, Sierra Leone and Guinea, appealed to the organizations for more assistance fighting the epidemic. The World Bank has already committed \$400 million in loans to the West African nations affected by Ebola. Sierra Leone's President Ernest Bai Koroma told the meeting that the outbreak was a "tragedy not seen in modern times."

A report released last week by the World Bank predicts catastrophic consequences for the economy of West Africa if the epidemic is not contained. The report estimates that the Ebola outbreak could end up costing the West African economy \$32.5 billion by the end of 2015 if it spreads into the countries bordering on Liberia, Sierra Leone and Guinea.

It is estimated that economic growth for 2014 will be significantly impacted by the epidemic, with the three countries combined losing \$359 million in Gross Domestic Product. The World Bank estimates that the

entire West African economy will have lost at least \$2.2 billion through the end of this year.

In addition to the severe economic impact, the Ebola epidemic has completely overwhelmed the healthcare systems in Liberia and Sierra Leone. A dangerous secondary outcome of the epidemic is that those with other illnesses and conditions have increasingly limited access to healthcare facilities and medicine.

In Sierra Leone the number of women attending reproductive health clinics declined by 25 percent between May and June, raising fears that the country will witness a dramatic increase in maternal and infant mortality. Health experts expect unnecessary deaths from diarrhea, malaria and pneumonia to soar as an increasing number of people avoid clinics out of fear of contracting Ebola or are turned away from overwhelmed clinics and hospitals.

Highlighting the danger for the rest of the world as the epidemic continues to grow, Teresa Ramos, a nurse in Spain, was confirmed this week as the first case of Ebola transmission outside of Africa. She contracted the virus after tending to an infected priest who had been flown back to Spain from West Africa for treatment.

Brazil also reported its first suspected case, Souleymane Bah from Guinea, who travelled to the country via Morocco. He went to a hospital in the city of Cascavel, in the south of Brazil, October 9, complaining of a fever, and was transferred by plane to the National Institute for Infectious Diseases in Rio de Janeiro.



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